A REMARKABLE

CASE OF SEMI-CONSCIOUS EPILEPTIC AUTOMATISM.

By C. H. HUGHES, M.D.,

FORMER SUPERINTENDENT AND PHYSICIAN OF THE ST. LOUIS, MO., STATE LUNATIC ASYLUM, ETC.

Reprinted from THE MEDICAL RECORD, August 2, 1879.

DEAR SIR:—The season is too hot in this latitude to justify a lengthy discussion of the question as to whether unconsciousness is an absolute essential of

epilepsia and epileptoid.

But a recent very able lecture in your columns, by that most able lecturer and writer, Allan McLane Hamilton, asserts that "epilepsy is a malady which in all cases implies a recurring loss of consciousness," etc.; and the writer does not "believe that any act of violence which has been done while the individual is said to be epileptic or suffering from an attack of epileptic mania, can be excused unless there is at some time absolute unconsciousness."

As this is the sunstroke season, you will, I am sure, and so will Dr. Hamilton, pardon me for treating the subject with such brevity as will soon be apparent.

A large experience with epilepsia, and especially in the observation of epileptiform disease, has forced me to abandon, along with Mr. Hughlings Jackson, the criterion of unconsciousness as an absolute essential of the status epilepticus.

For the typical grand mal, unconsciousness is an unvarying characteristic; but in le petit mal, while a brief period of unconsciousness is almost the universal rule, it must be conceded that there do sometimes occur cases clearly attributable to this disease when an element of real consciousness, usually, however, a sort of dreamy consciousness, such as one sometimes feel just before waking exists.

Dr. Hughlings Jackson, in the fifth volume of the "West Riding Asylum Reports," 1875, in an interesting article "on the temporary mental disorders after epileptic paroxysms," sheds a flood of light upon the medico-legal aspects of epileptic states. Momentary lapses of memory—and, acts of cerebral automatism after epileptic seizures are supplementary of them, as is often seen among the insane—are indeed very com-

I have seen some of these automatic acts come on as the precursor of the subsequent undoubted grand mal.

A medical friend of this city consulted me in regard to a gentleman who was first led to seek his advice, on finding that he had, without knowing it, while standing at his desk (he was the bookkeeper of his firm), filled up and signed his firm's note, tearing the note from the note-book and filling in the stub unconsciously, without attracting any one's attention by any convulsive or other singular movement.

This was unconscious cerebration, due to incipient epileptic disease; the case having left the city, and since developed into one of well-marked epilepsia.

The following case, however, is one of conscious automatic cerebration, due to undoubted epilepsia, and is the most remarkable case on record:

The case was referred by Dr. Rumbold, the editor of the St. Louis Medical and Surgical Journal, to Dr. Chas. W. Stevens and myself, and a careful inquiry elicited the following facts, which possess a medicolegal significance too obvious to require comment. I conclude this hasty prelude to the case with the remark that an extensive observation of epileptic and epileptoid states have gradually forced upon me the conviction that their mental possibilities are infinitetheir vagaries being such as no man can yet number. We cannot be too cautious before courts in our estimate of the volitional element in the acts of epileptics and epileptoids. If a man may reveal his disease in so simple a thing as tearing up or eating a prescription blank just handed him by his physician, or wiping his nose on a piece of paper, or spitting on the floor when not accustomed to doing so, he may pull a trigger or cut a throat, and be, seemingly, conscious, or, as in the following case, do as he has often been wont to do, with the exception of not realizing that what he is doing, while it is not unnatural, is out of time and place.

In the fall of 1867 Dr. N. got up after midnight, dressed himself, walked a quarter of a mile to a certain place on his farm to look at his "stock." After he had been there a while, seemingly to him a very short time, he awoke to a realization of the fact that it was not the proper time for him to be at such a place; although conscious of every step he took to get there. He went back to his house, undressed himself, and again retired to bed.

He was conscious of all that he did from the time of rising to dress himself, but did not realize the incongruity of his position, and that he ought then to have been in bed.

In 1875 he again did about the same thing, getting up and dressing himself, putting on his boots, clothing, cravat, collar, and hat, and taking his watch from under his pillow and looking at the time, every act being remembered in the order in which it was done. He this time walked out into the street.

When he fully came to a realization of the fact that he ought to have been in bed, he was standing by a fence looking over into a vacant lot. He knew he had come to the lot, but not that he ought not to have been there at that hour of the night, until after a time it occurred to his mind that he ought to have remained in bed, whither he immediately returned.

The patient had had many real epileptic seizures preceding these somnambulistic displays, his paroxysms being so violent that they so alarmed his second wife, to whom he had lately been married, that she has parted from him.

1813 CHOUTEAU AVENUE, ST. LOUIS.

Hughed (6. H.